Statement to House Committee on Veterans Affairs Regarding Deficiencies at the Manchester VA Medical Center.

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September 2017

Mr. Chairman and Members of the Committee,

My name is Ed Kois, and I am a VA physician at the Manchester Medical Center. I have worked there since 2012 in the Spinal Cord Clinic and in the Pain Clinic. Even though I receive a paycheck through the VA Agency, I consider myself an employee of the Veterans of our state. It was because of this and because of my concern over their care, which I had deemed extremely inadequate, that I spoke out, first by going through and within the VA system.

After almost two years of utilizing all avenues available to me, and receiving no satisfactory solutions, I spoke to my colleagues and discovered that many of them had similar issues with management and patient care. Because of my fear of further harm occurring to our patients, I contacted an attorney who assisted us in being heard by Senator Shaheen and Representative Kuster, and then the process began with the Office of Special Counsel. Our Whistleblowers are comprised of doctors, nurse practitioners, nurse anesthetists, as well as a Business Service Line Manager.

The Boston Globe publication on July 16, 2017, regarding the Manchester Medical Center, almost one year after filing our Whistleblower Complains with the Office of Special Counsel, finally brought the light of day to our serious concerns about the care and treatment of the Veterans, as well as the sub-standard facilities and equipment found in Manchester. The details are well chronicled in this article, as well as all of the Whistleblower filings on record with the Office of Special Counsel.

The problems that are seen at the Manchester VA, however, are not unique to just this facility. I believe the same issues can be seen nationally.

The publication of the Boston Globe article resulted in a meeting with Dr. David Shulkin, the Secretary of the VA, on August 4, 2017, where he met with eight (8) of the Manchester VA Whistleblowers. Dr. Shulkin listened to us, and quickly acted to remove the three (3) top administrators, who were the focus of many of our complaints. Of note, however, it was not just these three (3) individuals, but also the entire operational system in Manchester that had led to the problems elucidated by myself and the other Whistleblowers.

As our attorney alluded to in her letters to Senator Shaheen and Representative Kuster, the inverted pyramid structure of operations at the Manchester VA, wherein there are relatively few, if any, clinicians in positions of power making patient care decisions, as well as decisions regarding needed equipment and purchase of replacement equipment, caused a disconnect between the providers of the care and the bureaucrats who controlled the decisions. This disconnect was largely responsible for the substandard treatment and care of my spinal cord patients, that led us to where we are now.

Dr. Shulkin named an Acting Medical Director, Alfred Montoya, and Dr. Rush, as Acting Chief of Staff; however, this temporary situation has not changed the corporate culture from the nurse managers below Dr. Rush and Mr. Montoya. Conditions are still unacceptable in the OR and other practice areas where managers who were put in place by Carol Williams, who was removed from her position by Dr. Shulkin on August 4th. In fact, although Dr. Shulkin removed Dr. James Schlosser as Chief of Staff on July 16, 2017, he has applied to be the new Community Care Director at the Manchester VA, and appeared before a screening committee on September 7, 2017. How can this happen?

Some things have started to improve. I have recently been asked to participate in the search committee for a new Chief of Staff. It would be advisable to put other providers on the search committee for the new Medical Center Director, and the new Chief of Nursing. Apparently, these positions cannot be filled until the current Medical Director and Chief of Staff are formally removed from their positions. It has been two (2) months and they still have not been removed, and so there has been no outside advertising for those positions.

As I said above, the issues with the administration and operational matters at the Manchester VA are not unique to Manchester; that a remodeling of the Manchester VA operation system can be used as a template for other small VA Medical Centers in this country.

Problems such as the over-reliance on metrics, the incredible bureaucratic quagmire that has existed for decades need to be changed. We must move in a direction that mirrors the public sector hospitals, where clinicians are on the governing boards, and provide a balance to the bean counters when they lose sight of the true mission of the medical facility, which is to provide excellent patient care to our Veterans.